

COME JOIN THE GANG!!



## THE ROGERS AQUATICS CENTER SUMMER SWIM TEAM!!!

Back this summer! The [Rogers Aquatics Center Summer Swim Team!](#) This summer developmental swim team will be full of fun, skill building... and some friendly competition with other area summer league programs!

A Summer Swim Team is a GREAT way for kids to.....

- Become stronger, more competent, SAFER swimmers
- Learn the swimming strokes of Freestyle, Backstroke, Breaststroke and Butterfly
- Have FUN with fitness in an encouraging, positive, and friendly environment
- Learn the value of competition in a program geared toward “racing fun for all” not just the best

The program will consist of [\(2\) 4-week sessions](#) during the months of [June and July](#) and swimmers can [register for either - or both - sessions](#). We are eager to coach swimmers [ages 5 through 16 years](#) old who can swim one length of the pool - unassisted. *(PARENTS...your child does not need to be able to swim correctly, only to make it across the pool unassisted. It is our job as coaches to teach them the proper technique to cross the pool correctly....in all four strokes!)* The program cost of [\\$75 per swimmer, per 4 week session, provides 11 one-hour practices and several meets against area teams](#). Custom Wet Willy's Ballistic Bullfrogs t-shirts will be available for an additional \$10 per shirt. New this year – custom swim caps – will be available for \$3.

### Sessions:

JUNE: Monday, June 9<sup>th</sup> – Wednesday, July 2<sup>nd</sup>      JULY: Monday, July 7<sup>th</sup> – Wednesday, July 30<sup>th</sup>

### NEW PRACTICE SCHEDULE!

Practice Schedule: Mondays, Wednesdays, Fridays

Swim Meet schedule will be posted by May 1<sup>st</sup>

Senior Bull Frogs 8:30 – 9:30 (ages 11-16)

Junior Bull Frogs 9:20 – 10:20 (ages 9-10)

Mini Bull Frogs 10:10 – 11:10 (ages 8 and under)

Practices will be comprised of [10 minutes of dryland](#) exercises and stretching, [40 minutes of swim technique](#) and [endurance](#) building, and [10 minutes of FUN water games](#).

The Swim Meets are traditionally held in the evenings or on Saturday mornings and last about 2 hours.

[Parents please note:](#) We do not take attendance at the practices or meets. If a child needs to miss a practice due to vacation or camp, no worries! Bring them when you can! As well, the cost of the program is still a great value, even if a child misses a week due to camp or vacation.

The program director and Head Swim Coach is [Anita Heil Parisi](#), a current coach of the Razorback Aquatic Club Aquahawks competitive swim team, a member of the Arkansas Swimming Hall of Fame, and a previous All-American Collegiate swimmer. Anita will be assisted by college and high school students - all with swimming and coaching/teaching experience.

***RETURN THE REGISTRATION FORM SOON***  
***BECAUSE SPACE IS LIMITED!!***  
**Registration Form for the “Ballistic Bullfrogs”**  
**Rogers Aquatics Center Swim Team: Summer 2014**

Child's Name:

1. \_\_\_\_\_ Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ T-shirt size\* \_\_\_\_\_  
2. \_\_\_\_\_ Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ T-shirt size \_\_\_\_\_  
3. \_\_\_\_\_ Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ T-shirt size \_\_\_\_\_

\*T-shirts are \$10 each. Sizes are Youth M (6-8), Youth L (10-12), Youth XL (14-16), Adult S (longer and thinner than YXL), Adult M and Adult L

Parents' Names: \_\_\_\_\_

Address: \_\_\_\_\_

Email addresses: \_\_\_\_\_

Home phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Cell phones: ( \_\_\_\_\_ ) \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Circle One: Session I (Monday, June 9 – July 2) or Session II (July 7 – July 30) or BOTH

Circle One: Senior Bull Frogs (age 11-16) 8:30-9:30 Mini Bull Frogs (age 8 and under) 10:10-11:10  
Junior Bull Frogs (age 9-10) 9:20-10:20

Cost: \$75 per participant per month, plus optional \$10 per t-shirt and \$3 per cap. (The shirt is the same as last year.)

Send registration form and check to: Suzy Turek  
Rogers Parks and Recreation  
113 N. 4<sup>th</sup> Street  
Rogers, AR 72756

Please write “Summer Swim Team” in the memo line of your check. A confirmation email will be sent upon registration receipt.

**A parent or legal guardian must sign this form. By signing this form, you waive all claims for injuries that the participant may sustain through this program.** I agree to assume full risk and to waive and release all claims I and/or the participant may have against the City of Rogers. This release also includes the City of Rogers' agents, servants, and employees from any such claims resulting from injury, damages, or loss sustained on account of participation in this program. I understand that I am responsible for all personal medical insurance and that the participant's family must cover all medical costs incurred. I agree to emergency treatment by a physician or hospital in the event that the listed emergency contact cannot be reached.

Parent or Legal Guardian Signature:

\_\_\_\_\_ Date: \_\_\_\_\_

**For questions, please contact Anita Parisi at 479-422-1266 or email [anitaparis@sbcbglobal.net](mailto:anitaparis@sbcbglobal.net)**

**We'll see you at the pool – Monday, June 9th**  
**Bring goggles, towel, and ponytail holder or cap**